INCIDENTAL OBSERVATION





Observer Information

Observation Date*

Email Name **Phone**

Site Location

If you don't have a GPS, you can select your site coordinates online using a mapping tool

UTM Zone* Easting* Northing*

Land Information

Describe the location - are there any dominant plants or special features?

Habitat

	Federal government	Estate	Privately owned – individual
Landowner type	Provincial government	Trust	Privately owned – corporation Privately owned –
(choose one)	Municipal / local government	Partnership (legal)	organization
	First Nations	Parks Canada	Other (specify in comments)

Describe the surrounding area. Are there signs of human disturbance (e.g. logging, brush clearing, water level management structures) or habitat fragmentation (e.g. road cutting across a wetland, clear cuts, paved parking lots)?

What is the distance to the nearest road, urban areas, agricultural areas or industrial development?

Landscape context

Describe the quality of the habitat or area - for example, is there any habitat degradation, pollution, cattle trampling,

Condition

feral house cats, presence of exotic species?

Species Information

Species name*

Number of adult males*	Number of juvenile males*	Number of larvae or tadpoles*
Number of adult females*	Number of juvenile females*	Number of eggs*
Number of adult unknown sex*	Number of juvenile unknown sex*	Number of egg masses*

Number of unknown age and sex*

	Basking	Excreting	Hunting	Territorial habitat
Activity	Carcass	Feeding	Migrating seasonally	Thermal habitat
(choose one)	Courting	Fleeing	Security and thermal habitat	Travelling
	Denning	Hibernating	Security habitat	Reproducing

If the animal was seen and heard, indicate "seen" and note in the comments that it was also heard

Seen or heard?

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Animal Condition

If the animal was injured, sick or dead, please note the additional information below

General condition / status*	Abnormal	Unknown			
	Sick	Dead			
(choose one)	Injured				
	Body / other tr	auma	Unresponsive	Abnormal eyes	
Description*	Bleeding nose / mouth		Cannot get up	Skin lumps	
•	Bleeding body	,	Thin	Swelling of body part	
(choose one)	Obvious woun	d	Appears to be blind	Ticks	
	Limping		Abnormal movement	Abnormal colour	
Cause of injury, sickness or	Vehicle collision	on	Unknown		
	Animal attack		Other (specify in comments)		
death	Shot				

Comments

Other comments about the site or the animal condition (be descriptive)

Photos

Include up to four photos of the animal and its habitat during data entry.

Submit Data

Online: http://www.env.gov.bc.ca/wildlife/wsi/incidental_obs.htm

Email: bcfrogwatch@victoria1.gov.bc.ca

Mail: BC Frogwatch

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